SCC eFile	2014 ANNUAL REPORT COMMONWEALTH OF VIRGIN STATE CORPORATION COMMIS	IIA	
1.) CORPORATION NAME:		DUE DATE: 3/31/2014	
NORCAL Mutual Insurance Co	ompany	502 5/1121 6/01/201 1	
2.) VA REGISTERED AGENT NAM CT CORPORATION SYSTEM		SCC ID NO: F1853599	
4701 COX ROAD, SUITE 285 GLEN ALLEN, VA		5.) STOCK INFORMATION CLASS AUTHORIZED	
3.) CITY OR COUNTY OF VA REG HENRICO COUNTY	ISTERED OFFICE:	1.0	
4.) STATE OR COUNTRY OF INCO	DRPORATION:		
6.) PRINCIPAL OFFICE ADDRESS:			
ADDRESS: 560 DAV SUITE 2			
CITY/ST/ZIP: SAN F	RANCISCO, CA 94111		
7.) DIRECTORS AND PRINCIPAL C	OFFICERS: All directors and princi may be designated as	pal officers must be listed. An individual both a director and an officer.	
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	THEODORE SCOTT DIENER P/CEO 560 DAVIS ST SAN FRANCISCO, CA 94111	FFICER DIRECTOR	
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	JULIA L. BURNS VP/HR 560 DAVIS ST SAN FRANCISCO, CA 94111	FFICER DIRECTOR	
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	DOUGLAS M. HALL VP/IT 560 DAVIS ST SAN FRANCISCO, CA 94111	FFICER DIRECTOR	
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	KEITH A. HUI VP/LEAD IO 560 DAVIS ST SAN FRANCISCO, CA 94111	FFICER DIRECTOR	
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	DENNIS A. MEISEL VP/FIN/CNTRLR 560 DAVIS ST SAN FRANCISCO, CA 94111	DIRECTOR DIRECTOR	
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	DUSTIN A SHAVER VP/RM 560 DAVIS ST SAN FRANCISCO, CA 94111	FFICER DIRECTOR	

NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	NEIL E. SIMONS VP/REG COMP 560 DAVIS ST SAN FRANCISCO, CA 94111	X OFFICER	DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	JEFFREY J. SMITH VP/ACTUARY 560 DAVIS ST SAN FRANCISCO, CA 94111	X OFFICER	DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	KATHERINE HELEN CROCKER SVP/CLO/S 560 DAVIS ST SAN FRANCISCO, CA 94111	X OFFICER	DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	DENIS J. DILLON TREASURER 560 DAVIS ST SAN FRANCISCO, CA 94111	X OFFICER	DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	PAUL R. GABEL SVP/CLAIMS/RM 560 DAVIS ST SAN FRANCISCO, CA 94111	X OFFICER	DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	MARK D. JOHNSON SVP/CFO 560 DAVIS ST SAN FRANCISCO, CA 94111	X OFFICER	DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	PATRICIA A. DAILEY, MD VICE CHAIRMAN 560 DAVIS ST SAN FRANCISCO, CA 94111	OFFICER	X DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	JAAN E. SIDOROV, MD CHAIRMAN 560 DAVIS ST SAN FRANCISCO, CA 94111	OFFICER	X DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	TIMOTHY J. FRIERS SVP/CUO 560 DAVIS STREET SUITE 200 SAN FRANCISCO, CA 94111	X OFFICER	DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	MICHAEL G. ROQUE VP/BUSDEV 560 DAVIS STREET SUITE 200 SAN FRANCISCO, CA 94111	X OFFICER	DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	RONALD C. RUMIN SVP/STRAT DEV 560 DAVIS STREET SUITE 200 SAN FRANCISCO, CA 94111	X OFFICER	DIRECTOR

		OFFICER	χ DIRECTOR			
NAME:	SANDRA L. BERETTA					
TITLE:	SECRETARY					
ADDRESS:	560 DAVIS STREET					
CITY/ST/ZIP/CO:	SUITE 200 SAN FRANCISCO, CA 94111					
311.173.7.21.7.33	CANTINATOROU, OA 34111	OFFICER	DIRECTOR			
NAME:		OFFICER	X DIRECTOR			
TITLE:	FABIOLA COBARRUBIAS DIRECTOR					
ADDRESS:	560 DAVIS STREET					
	SUITE 200					
CITY/ST/ZIP/CO:	SAN FRANCISCO, CA 94111					
		OFFICER	χ DIRECTOR			
NAME:	ALICE H. GANNON					
TITLE:	DIRECTOR					
ADDRESS:	560 DAVIS STREET					
CITY/ST/ZIP/CO:	SUITE 200					
C111/31/211/CO.	SAN FRANCISCO, CA 94111					
		OFFICER	X DIRECTOR			
NAME:	ROGER M. HAYASHI					
TITLE: ADDRESS:	DIRECTOR 560 DAVIS STREET					
ADDRESS.	SUITE 200					
CITY/ST/ZIP/CO:	SAN FRANCISCO, CA 94111					
		OFFICER	χ DIRECTOR			
NAME:	MARY DIANE KOKEN		X			
TITLE:	DIRECTOR					
ADDRESS:	560 DAVIS STREET					
	SUITE 200					
CITY/ST/ZIP/CO:	SAN FRANCISCO, CA 94111					
		OFFICER	χ DIRECTOR			
NAME:	STEVEN J. PACKER					
TITLE:	DIRECTOR					
ADDRESS:	560 DAVIS STREET					
CITY/ST/ZIP/CO:	SUITE 200 SAN FRANCISCO, CA 94111					
G111/G1/211/GG.	SAN FRANCISCO, CA 94111					
		OFFICER	X DIRECTOR			
NAME:	REBECCA J. PATCHIN					
TITLE: ADDRESS:	DIRECTOR 560 DAVIS STREET					
ADDICESS.	SUITE 200					
CITY/ST/ZIP/CO:	SAN FRANCISCO, CA 94111					
		OFFICER	χ DIRECTOR			
NAME:	SCOTT C. SYPHAX		^			
TITLE:	DIRECTOR					
ADDRESS:	560 DAVIS STREET					
	SUITE 200					
CITY/ST/ZIP/CO:	SAN FRANCISCO, CA 94111					
I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.						
/s/ NEIL E. SIMONS NEIL E. SIMONS, VP/REG COMP 3/21/2014						
SIGNATURE OF DIRECTOR/OFFICER	PRINTED NAME AND COF		DATE			
LISTED IN THIS REPORT TITLE						
It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material						

It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.